5Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Δ	T	ΓE	NI"	ric	M

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption state exemption unless such exemption is predicated on the filing of a federal notice.

			ν,	OMB APPROVAL				
UNITED ST	ATES		OMB Number C		-			
SECURITIES AND EXCHA	NGE COMMISSIO	M PROCE	L	OMB Number: 3235-0076				
Washington, D.	C. 20549	INED ESSING	Expires: May 31					
FORM	n 🖟	RECEIVE	Estimated avera	ge burden hours per respo	nse1			
		3005	1/	SEC USE ONLY				
NOTICE OF SALE O	F SECURITIES	116 P	Prefix	SEC COL CIVET	Serial			
PURSUANT TO REG SECTION 4(6),	AND/OR	ALC IF I	3/		<u> </u>			
UNIFORM LIMITED OFFE		ASA SA	7	DATE RECEIVED)			
		D.C.						
Name of Offering (check if this is an amendment ar	nd name has chang	ed and indicate cha	nge)					
Name of Offering (Check II this is all afferioment at	id flame flas Glang	eu, and mulcate cha	nge.)	11792	G (
Common Stock								
Filing Under (Check box(es) that apply): [] Ru	lo 504 [] Rule 505	[X] Rule 506	[] Section 4(6)	[]ULOE			
[] Nu	le 304 [] Nule 303	[X] Naie 300	[] 36011011 4(0)	[] 0101			
Type of Filing: [] New Filing [X] Amendment								
<u>,</u>								
	A. BASIC	DENTIFICATION I	DATA					
Enter the information requested about the issue	er (0205227	5			
Name of Issuer (check if this is an amendment an	d name has change	ed, and indicate char	nge.)	_				
Address of Executive Offices (Number and Stree	at City State Zin (Code) Telephone N	lumber (Including Are	22 Code)				
Address of Exceditive Offices (Number and Office	et, Oity, Otate, Zip C	Jode) relephone i	diffici (moleculing Art	sa oode)				
53 Hoodridge Drive, Pittsburgh, PA 15228			412-401-7670					
Address of Principal Business Operations (Number	er and Street, City,	State, Zip Code) Tel	ephone Number (Incl	uding Area Code) (if differ	ent from Executive			
Offices)								
Brief Description of Business								
Development of Madical Devices				r constant	nnegge			
Development of Medical Devices		N. 11.2 T.			The Louis			
Type of Business Organization				1	an 2002			
[X] corporation	[] limited par	tnership, already for	med	[] other (please specify)	SEP 1 9 2000			
[] business trust	[] limited par	tnership, to be forme	ed		TUDARON			
					CINANCIAL			
· · · · · · · · · · · · · · · · · · ·					FINAL CONTRACTOR			
	Mo	onth Year						
Actual or Estimated Date of Incorporation or	г	[7][97]	Isuto A [X]	[] Estimated				
Organization:				[] LStillated				
Jurisdiction of Incorporation or Organization: (Enter		ostai Service aborevi er foreignjurisdiction)						
OIV IOI V	Janada, 1 14 101 Ottic	or foreignjungalenen)	ני זו ייז					
GENERAL INSTRUCTIONS								
Federal: <i>Who Must File:</i> All issuers making an offering of securities in reliance	e on an exemption under l	Regulation D or Section 4(6	6), 17 CFR 230.501 et seq. o	or 15 U.S.C. 77d(6).				
When to File: A notice must be filed no later than 15 days after the fi date it is received by the SEC at the address given below or, if recei-								
Where to File: U.S. Securities and Exchange Commission, 450 Fifth	Street, N.W., Washington	, D.C. 20549.						
Copies Required: Five (5) copies of this notice must be filed with the or printed signatures.		, , ,			, ,,			
Information Required: A new filing must contain all information reque material changes from the information previously supplied in Parts A				anges thereto, the information requ	ested in Part C, and any			
Filler Can Those is an fadout Silver for								

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice

and must be completed.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer:
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: [] Promoter [] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

B. INFORMATION ABOUT OFFERING

1. Has	the issue	r sold, or d	loes the iss	suer intend	to sell. to	non-accre	dited inves	tors in this	offering?.				Yes	
		,						Column 2,					[]	ı
2. Wha	at is the m	inimum inv	estment th	at will be									<u>\$</u>	
3. Doe	s the offer	ing permit	joint owne	rship of a	single unit	?							Yes []	r f
similar r associa dealer.	emunerat ted persor	ion for soli n or agent an five (5)	citation of point of a broker	ourchasers or dealer	s in connec registered	ction with s with the S	ales of sec EC and/or	d or given, curities in the with a state a broker or	ne offering e or states	. If a perso , list the na	n to be list ame of the	ed is an		,
Full Nar	ne (Last n	ame first, i	if individua)	<u> </u>						·			
Busines	s or Resid	lence Add	ress (Numl	per and St	reet, City,	State, Zip	Code)				-			
Name o	f Associat	ed Broker	or Dealer											
States in	n Which P	erson Liste	ed Has Sol	icited or Ir	itends to S	olicit Purc	nasers		 			- The state of the		
(Check [AL] [IL] [MT] [RI]	"All States [AK] [IN] [NE] [SC]	s" or check [AZ] [IA] [NV] [SD]	individual [AR] [KS] [NH] [TN]	States) [CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	[] AII	States
Full Nar	ne (Last n	ame first, i	f individua))			·			<u></u>				
Busines	s or Resid	lence Addi	ress (Numi	per and St	reet, City,	State, Zip	Code)							
Name o	f Associat	ed Broker	or Dealer				····				<u> </u>			
States in	n Which P	erson Liste	ed Has Sol	icited or In	itends to S	olicit Purc	nasers			•		<u></u>		
(Check [AL] [IL] [MT] [RI]	"All States [AK] [IN] [NE] [SC]	or check [AZ] [IA] [NV] [SD]	individual [AR] [KS] [NH] [TN]	States) [CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [Mi] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	[]·All :	States
Full Nar	ne (Last n	ame first, i	f individua)	- ·, .									
Busines	s or Resid	ence Addr	ress (Numb	per and St	reet, City,	State, Zip	Code)							
Name o	f Associat	ed Broker	or Dealer			,								
States i	n Which P	erson Liste	ed Has Sol	icited or In	tends to S	olicit Purcl	nasers							
(Check [AL] [IL] [MT] [RI]	"All States [AK] [IN] [NE] [SC]	" or check [AZ] [IA] [NV] [SD]	individual [AR] [KS] [NH] [TN]	States) [CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	 [GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	[] AII:	States

Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

Type of Security Debt	Aggregate Offering Price \$ 0	Amount Alread Sold \$ 0
Equity		\$ 751,809
[X] Common [] Preferred		
	. 0	• •
Convertible Securities (including warrants)		\$ <u>0</u> \$ 0
Other (Specify)		\$ 0
Total		\$ 751,809
	<u>\$ 101,000</u>	<u>φ101,000</u>
Answer also in Appendix, Column 3, if filing under ULOE.		
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors	18	\$ 751,809
Non-accredited Investors	0	\$ <u> </u>
	0	\$ <u> </u>
Non-accredited Investors Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE.	0	-
Non-accredited Investors Total (for filings under Rule 504 only)	0	-
Non-accredited Investors Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.	0	\$Dollar Amount
Non-accredited Investors Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Type of offering	Type of Security	\$
Non-accredited Investors Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Type of offering Rule 505	Type of Security	\$Dollar Amount
Non-accredited Investors Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Type of offering Rule 505 Regulation A	Type of Security	\$Dollar Amount
Non-accredited Investors Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Type of offering Rule 505	Type of Security	\$Dollar Amount
Non-accredited Investors Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Type of offering Rule 505 Regulation A Rule 504	Type of Security	\$Dollar Amount
Non-accredited Investors Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Type of offering Rule 505 Regulation A Rule 504 Total 4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	Type of Security	\$Dollar Amount
Non-accredited Investors Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Type of offering Rule 505 Regulation A Rule 504 Total 4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box	Type of Security	Dollar Amount Sold \$ \$ \$ \$ \$ \$ \$ \$
Non-accredited Investors Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Type of offering Rule 505 Regulation A Rule 504 Total 4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees	Type of Security	Dollar Amount Sold \$ \$ \$ \$ \$ \$
Non-accredited Investors Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Type of offering Rule 505 Regulation A Rule 504 Total 4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs	Type of Security	Dollar Amount Sold \$ \$ \$ \$ \$ \$ \$ \$
Non-accredited Investors Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Type of offering Rule 505 Regulation A Rule 504 Total 4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs Legal Fees Accounting Fees Engineering Fees	Type of Security	Dollar Amount Sold \$ \$ \$ \$ \$ \$ \$
Non-accredited Investors Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Type of offering Rule 505 Regulation A Rule 504 Total 4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs Legal Fees Accounting Fees Sales Commissions (specify finders' fees separately)	Type of Security	Dollar Amount Sold \$ \$ \$ \$ \$ \$ \$ \$ \$
Non-accredited Investors Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Type of offering Rule 505 Regulation A Rule 504 Total 4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs Legal Fees Accounting Fees Engineering Fees	Type of Security	Dollar Amount Sold \$ \$ \$ \$ \$ \$ \$

_	OFFERING PRICE	MIIMPED (OF INVESTORS	EADENGES	AND USE OF	PPOCEEDS
U.	OFFERING PRICE	NUMBER	UP INVESTURS.	EXPENSES	AND USE OF	- PRUCEEDS

- b. Enter the difference between the aggregate offering price given in response to Part C Question 1 and total expenses furnished in response to Part C Question 4.a. This difference is the "adjusted gross proceeds to the issuer." \$749.359
- 5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C Question 4.b above.

	Officers,	
	Directors, &	Payments To
	Affiliates	Others
Salaries and fees	[X] \$1.87,339	[]\$
Purchase of real estate	[]\$	[] \$
Purchase, rental or leasing and installation of machinery and equipment	[] \$	[] \$
Construction or leasing of plant buildings and facilities	[] \$	[]\$
Acquisition of other businesses (including the value of securities involved in offering that may be used in	[1 S	r 1\$
exchange for the assets or securities of another issuer pursuant to a merger)		()
Repayment of indebtedness	[] \$	[] \$
Working capital	[X]\$562,020	[]\$
Other (specify):	[] \$	[]\$
Column Totals	[] \$	[] \$
Total Payments Listed (column totals added)	[X]	\$ <u>749,359</u>

Payments to

D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)
ALung Technologies, Inc.

Name of Signer (Print or Type)
NICHOLAS KUHN

Signature

Fittle of Signer (Print or Type)
President And Chief Executive Officer

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E. STATE SIGNATURE

1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No
	[]	[X

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239,500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature Date / Date
ALung Technologies, Inc.	120/02 8/20/02
Name of Signer (Print or Type)	Title of Signer (Print or Type)
NICHOLAS KUHN	President And Chief Executive Officer

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	Intend to sell to non accredited investors in State (Part B-Item 1)			Type of i	nvestor and (Pa	5 Disqualification under State ULOE (if yes, attac explanation of waiver granted) (Part E-Item 1)			
State	Yes	No	Common Stock	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA									
co		Х	\$60,000	2	\$60,000	0	0		X
СТ									
DE					·				
DC									
FL		Х	\$25,002	1	\$25,002	0	0		X
GA									
н					innan		<u>Carantiinatinamaanaanaanaanaanaanaanaanaanaanaanaana</u>		
ID									
IL									
IN									
IA									
KS									
KY									
LA									
ME				_	A	_	_		
MD		Х	\$40,000	1	\$40,000	0	0		X
MA									·
MI			* 00.0-0		#00 0 F C	_			.,
MN		X	\$90,050	3	\$90,050	0	0		X
MS									
MO									
MT NE								i i i i i i i i i i i i i i i i i i i	

NV								
NH								
NJ		*****		ninikkinė naiku arminikkino vakorajė i iraikini	dia di dina di sana di	n kito kirakani orang kirakanan anakan salah salah salah salah salah kirakan salah salah salah salah salah sal		
NM								
NY			and a man a state of the contract of the state of the sta				an an hình ann an agus à nình ann ann an h-àire an h-àire an aire an aire an aire an aire an aire an aire an a	
NC								
ND								
ОН		X	\$24,999	1	\$24,999	0	0 .	Х
ок								
OR								
РА		Х	\$472,758	9	\$472,758	0	0	Х
RI								
sc								
SD							. National section of the section of	
TN								
TX			nikatikan katamaki ki kina ki a newa na pyanja polikina nina na hidi malin nisi kin		nin en aucipon portinante più estado	******************************	amenun de servicio de doción par viver plote el de de decentricio	
UT								
VT		******	ahandununun ar oortaa oortaakin too oo oortaan oo oo oortaan					
VA						uituurin para siinesiitiin din asiiriin asiisiitas		
WA			annin in					
wv				and the contract of the contra				
WI		<u> </u>	\$39,000	1	\$39,000	0	0	Х
WY								
PR	HINGE							

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